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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875										7900	6 2
CLAIMS AS FILED – PART I (Column 1) (Column 2)							SMALL E	NTITY	OR	OTHER SMALL I	
FOR NUMBER FILED NUMBER EXTRA					R EXTRA		RATE	FEE		RATE	FEE
	FEE FR 1.16(a))							<i>:3</i> 25	OR		,790.0
TOTA	L CLAIMS FR 1.16(c))		minus 20 = *				x 35=		OR	x s <u>50</u> =	
NDE	PENDENT CLAIMS		minus 3				x : 100		OR	x : 200	
(37 CFR 1.16(b)) minus 3 = 1 MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							C81:+		OR	+5360	
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		OR	TOTAL	
True difference in counting has less than 2010, once of information											
CLAIMS AS AMENDED – PART II 3-18-05 (Column 1) (Column 2) (Column 3)						SMALL E	:NTITY	OR	OTHER SMALL		
<u>ر</u> ۲	F	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
삙	Total *	MENDMENT	Minus	PAID FOR	=		× 3 5 =		OR	× \$50±	
AMENDMENT	(37 CFR 1.16(c)) Independent (37 CFR 1.16(b))	\mathfrak{A}	Minus		=		× 5 400		OR	× \$200	
¥ K	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+:/80		OR	+,360	
FINGLE PRESENTATION OF MOETING ED ST.							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
ADDUTEL											
IT B	1	(Column 1) CLAIMS REMAINING AFTER		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ME	Total *	MENDMENT	Minus	**	=	1	x \$ 25_		OR	x \$50	
	Independent * (37 CFR 1.16(b))		Minus	***	=	1	× \$ 100		OR	× 2000	
AMENDMENT		ON OF MULTIPLE	E DEPENDE	NT CLAIM (37 CF	R 1.16(d))	1	+,180		OR	0 <u>35</u> ;+	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) + \$ BO OR + \$ COOD TOTAL ADD'L FEE OR ADD'L FEE											
(Column 1) (Column 2) (Column 3)											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total *	JAICH ADIAICIA I	Minus	**	=	1	× \$ 25=		OR	x \$ <u>50</u> =	
	(37 CFR 1.16(b)) Independent (37 CFR 1.16(b))		Minus	***	1=	1	× s 100		OR	x • <u>3</u> 00	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+:180		OR	+ ,360	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	If the entry in colu	ımn 1 is less th	an the entry	y in column 2, wr	ite "0" in column	n 3					
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".											

*** If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT AP	PLICATION F	EE DETERMIN	ATION RECORD
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Effective October 1, 2003

Application or Docket Number

10-5180-2220

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER	OTHER THAN	
(Column 1) (Column 2)							i	TYPE [\Rightarrow	OF	SMALL	ENTITY	
TOTAL CLAIMS			22					RATE	FEE	1	RATE	; FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TC	TAL CHARGE	ABLE CLAIMS	22 min	าบร 20=	٠,٦			XS 9=	·	OR	X\$16=	36	
INE	EPENDENT C	LAIMS .	7 mi	ทบร 3 =	4			X43=		OR	X86≈	344	
MULTIPLE DEPENDENT CLAIM PRESENT								-145=		OR	· -290=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	1150	
CLAIMS AS AMENDED - PART II											OTHER	THAN	
		(Column 1)		(Colun	nn 2)	(Column 3)		SMALL ENTITY OR SMALL ENT					
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER IUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	ŀ	RATE	ADDI- TIONAL FEE	
NON	Total	•	Minus	-		=		XS 9=		OR	XS18=		
AME	Independent	•	Minus		·	-	X43=			OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							ı	+145=		OR	+290=		
							•	TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colum	nn 2) ·	(Column 3)							
AMENOMENT B		CLAIMS . REMAINING AFTER AMENDMENT		HIĞHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MON	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
IME	Independent	*	Minus	***		=	ll	X43=		00	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	-		OR			
	·							+145=	· .	OR	+290=		
		•						TOTAL IDDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		· (Colum	in 2)	(Column 3)	٠.	•	•		•		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	ŕ	HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ջ	Total	•	Minus	**		= .		X\$ 9=		OR	X\$18=		
ME	Independent	•	Minus	***		3		X43=			X86=		
\Box	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.													
!!	the Highest Nun	nber Previously Pa	d For IN THIS	SPACE is	less than	20. enter *20.*	A	TOTAL DOIT, FEE		OR ,	TOTAL		
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													